

TANZANIA COMMUNICATIONS REGULATORY AUTHORITY



APPLICATION FOR FREQUENCY ALLOCATION/ASSIGNMENT FOR NETWORK ACCESS AND TRANSMISSION LINKS

This form is applicable for both Network access and transmission link frequencies but needs to be filled in and submitted separately.

Application fee payment receipt No..... of...../...../20.....

A. APPLICANT'S INFORMATION:

1. Name of the Applicant:.....
2. Postal Address:.....
3. Business Telephone:..... Fax:.....
4. Physical Address:
Road/street:..... Plot No.:.....
5. Website:..... E-mail:.....
6. Contact Person:..... E-mail:.....

B. PURPOSE FOR WHICH FREQUENCY ALLOCATION OR ASSIGNMENT IS REQUIRED

1. New frequency allocation for New Licence Framework: (*if applicable please tick and specify type of licence*):.....
.....
2. Additional frequency assignment for Existing Licence Framework: (*if applicable please tick and specify type of licence*):.....
.....

C. RADIOCOMMUNICATION NETWORK DETAILS

C.1 Radio Equipment Details:

1. Make and Type:.....
2. Frequency band (GHz):.....
3. Operating frequency range (MHz):.....
4. Channel Transmission Capacity (Mbps):.....
5. Modulation Scheme:.....
6. Frequency Stability:
7. Transmit power output to antenna (Watts):
8. Radiated spurious emissions:
9. Receiver sensitivity:
10. Receiver adjacent channel selectivity:
11. Number of frequency channels required:
12. Channelization Plan required (please specify relevant ITU-R Rec. applicable):.....
.....

C2. Antenna Details:

1. Type and Make of Transmit/Receive antenna:.....
2. Receiving antenna gain (in dB/dBi):.....

D. Radio Equipment Supply Information:

1. Name and Address of the supplier:
2. Postal Address:.....
3. Business Telephone:.....Fax:..... E-mail.....
4. Physical Address:
- Road/street:Plot No:.....

E. PROPOSED NETWORK ACCESS AND/OR TRANSMISSION FREQUENCY LINKS

1. Number of frequency channels required:.....
2. RF channel bandwidth required:.....
3. Transmit/receive separation:.....
4. Channel transmission capacity (Mbps):.....
5. Channelization plan required (please specify relevant ITU-R Rec. applicable).....
.....

F. DETAILS OF PROPOSED NETWORK ACCESS AND/OR TRANSDMISSION LINKS

Instructions: This matrix table below is applicable for both network access and transmission radio link frequencies. If you are applying for more than one network access base or more microwave radio station links, ***please specify relevant parameters by filling relevant details in the Excel Matrix Summary Annex to this Section F attached overleaf.***

Sheet No.....

Sno	Parameter		Station A	Station B
1	Exact site name of the station/ antenna tower location			
2	Geographical location	Longitude (<i>deg/min/sec</i>)		
		Latitude (<i>deg/min/sec</i>)		
3	Antenna size (m)			
4	Height of antenna above ground level (agl)			
5	Height of antenna above sea level (asl)			
6	Length of Hop from station A to B (Km)			
7	Antenna type			
8	Antenna gain			
9	Transmitter output power (Watts)			
10	Effective radiated power (EIRP) (Watts)			
11	Beam width			
12	Antenna polarization			
13	Azimuth (degrees)			
14	T/T channel spacing (bandwidth) (MHz) desired			
15	T/R separation desired			
16	System capacity (Mbps) desired			
17	No. of Channels or configuration (e.g. for 1+0; or 1+N system) desired			

G. Miscellaneous Information

- 1. Proposed date of putting into use:
- 2. Any Remarks:
-

H. DECLARATION

I hereby certify that information supplied in this application form is true in all respects and hereby declare that upon assignment of frequency, shall abide by the terms and conditions upon which the Frequency Licence is granted. I accept that my Frequency Licence may be revoked and appropriate penalty applied if it is found that I have been granted Frequency Licence based on incorrect information furnished to the Authority.

Date..... Signature of Applicant:

Name:

Company Stamp..... Designation:

.....

Please note:

- i. The following must be attached:
 - Covering application letter
 - A copy of the manual/ brochure of the radio equipment intended to be used
 - Proposed radio network plan and configuration
- ii. The application form must be dully filled in. The application which is partially filled or do not comply with all the above requirements shall not be considered.
- iii. Submit this application addressed to:-

DIRECTOR GENERAL
TANZANIA COMMUNICATIONS REGULATORY AUTHORITY
P. O. BOX 474
DAR ES SALAAM.